<b>S</b>								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD									/	_			
Effective January 1, 2003 40/616, 98												81	
CLAIMS AS FILED - PART I								LE	NTITY		OTHER	THAN	
TOTAL CLAIMS (Column 1) (Column 2)										OR	SMALL	ENTITY	
TOTAL CLAIMS			25				RAT	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE 375.00		OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			25 minus 20=		• \		X\$	X\$ 9= 4.T		OR	X\$18=		
	DEPENDENT C		3 minus 3 =				X42	?=		OR	X84=	·	
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT				+14	)=		OR	+280=		
.* If	* If the difference in column 1 is less than zero, enter "0" in column 2								始ひ	OR	TOTAL		
CLAIMS AS AMENDED - PART II									,		OTHER	THAN	
	<u> </u>	(Column 1)		(Colun		(Column 3) SMALI			ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 25	Minus	* 5	25	=	X\$ 9	=	1	OR	X\$18=		
	Independent	* 3	Miñus	PENIDENT	SI AIM	=/	X42	=	/	OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								)=		OR	+280=		
117118								TAL		OR	TOTAL		
	1/17/	(Column 1)		(Colun	nn 2)	(Column 3)	ADDIT. I	-551			ADDIT. FEE		
8		CLAIMS REMAINING	HIGHE NUME		EST	ST			ADDI-			ADDI-	
NDMENT		AFTER AMENDMENT		PREVIO	USLY	EXTRA	RATE	Ε	TIONAL FEE		RATE	TIONAL	
AMENDN	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	NTATION OF MI	Minus	***	CLAINA	=	X42	=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=		OR	+280=		
								EE.		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)									·.		:		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	PATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9		•	OR	X\$18=		
	independent	*	Minus	***		=	X42=	ᅪ		1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+	2	OR	X84=		
+140=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE		
1	The "Highest Num	ther Previously Paid	d For" (Total or	Independe	nt) is the	i 3, enter "3." highest number			ropriate box				